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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2008 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i> | | Docket Number (Optional) M0765.70044US01 | | | | | | | | | | | | | | | | | | | | | | | | |
|---|------------------------|---|-------------|------------|-------------------------|----|--|-------|------|----------|---|-------|-------|----------|---|--------|-------|----------|--|--------|-------|----------|---|--------|--------|-------------|
| Application Number | 10/526,579-Conf. #3818 | Filed January 9, 2006 | | | | | | | | | | | | | | | | | | | | | | | | |
| For DELIVERY OF THERAPEUTICS TO THE BRAIN AND SPINAL CORD | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Art Unit | 1649 | Examiner S. N. MacFarlane | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; padding: 5px;"></th> <th style="text-align: center; padding: 5px;"><u>Fee</u></th> <th style="text-align: center; padding: 5px;"><u>Small Entity Fee</u></th> <th style="text-align: right; padding: 5px;">\$</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;"><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: center; padding: 5px;">\$120</td> <td style="text-align: center; padding: 5px;">\$60</td> <td style="text-align: right; padding: 5px;">\$ _____</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: center; padding: 5px;">\$460</td> <td style="text-align: center; padding: 5px;">\$230</td> <td style="text-align: right; padding: 5px;">\$ _____</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: center; padding: 5px;">\$1050</td> <td style="text-align: center; padding: 5px;">\$525</td> <td style="text-align: right; padding: 5px;">\$ _____</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: center; padding: 5px;">\$1640</td> <td style="text-align: center; padding: 5px;">\$820</td> <td style="text-align: right; padding: 5px;">\$ _____</td> </tr> <tr> <td style="padding: 5px;"><input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: center; padding: 5px;">\$2230</td> <td style="text-align: center; padding: 5px;">\$1115</td> <td style="text-align: right; padding: 5px;">\$ 1,115.00</td> </tr> </tbody> </table> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p style="margin-left: 20px;"><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p style="margin-left: 20px;"><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>23/2825</u>. I have enclosed a duplicate copy of this sheet.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>40,212</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____</p> <p style="text-align: center; margin-top: 10px;">_____ /John R. Van Amsterdam/ Signature</p> <p style="text-align: right; margin-top: -10px;">September 4, 2008 Date</p> <p style="text-align: center; margin-top: 10px;">_____ John R. Van Amsterdam Typed or printed name</p> <p style="text-align: right; margin-top: -10px;">617.646.8000 Telephone Number</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of <u>1</u> forms are submitted.</p> | | | | <u>Fee</u> | <u>Small Entity Fee</u> | \$ | <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | \$ _____ | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$460 | \$230 | \$ _____ | <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1050 | \$525 | \$ _____ | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1640 | \$820 | \$ _____ | <input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2230 | \$1115 | \$ 1,115.00 |
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Certificate of Electronic Filing Under 37 CFR 1.8

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Dated: September 4, 2008

Signature: /Sylvana Householder/